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PTO/SB/01 (10-00)

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	JBP-554 CIP
	First Named Inventor	Curtis A. Cole et al.
	<i>COMPLETE IF KNOWN</i>	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR CLEANSING SENSITIVE SKIN USING AN ALKANOLAMINE
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/237,230	10/02/2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
09/742,622 09/961,911	12/21/00 09/24/01	Pending Pending

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
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AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Erin M. Harriman at telephone number (732) 524-3619.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Curtis A.		Family Name or Surname Cole	
Inventor's Signature		Date	
Residence: City Ringoes	State NJ	Country USA	Citizenship USA
Mailing Address 9 Orchard Road			
City Ringoes	State NJ	ZIP 08551	Country USA

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Margaret		Family Name or Surname Aleles	
Inventor's Signature		Date	
Residence: City Gladstone	State NJ	Country USA	Citizenship USA
Mailing Address 29 Mosley Road			
City Gladstone	State NJ	ZIP 07934	Country USA

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Elvin		Family Name or Surname Lukenbach	
Inventor's Signature		Date	
Residence: City Flemington	State NJ	Country USA	Citizenship USA
Mailing Address 160 Klinesville Road			
City Flemington	State NJ	ZIP 08822	Country USA

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Greg

Family Name
or Surname Skover

Inventor's
Signature

Date

Residence: City Princeton

State NJ

Country USA

Citizenship USA

Mailing Address 66 Cedar Lane

City Princeton

State NJ

ZIP 08540

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Sylvia

Family Name
or Surname Barkovic

Inventor's
Signature

Date

Residence: City Long Beach

State CA

Country USA

Citizenship USA

Mailing Address 2135 East 4th Street #201

City Long Beach

State CA

ZIP 90814

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Snehal

Family Name
or Surname Shah

Inventor's
Signature

Date

Residence: City Cerritos

State CA

Country USA

Citizenship USA

Mailing Address 13654 Felson Street

City Cerritos

State CA

ZIP 90703

Country USA

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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Blanca

Family Name
or Surname Campoblanco

Inventor's
Signature

Date

Residence: City Downey

State CA

Country USA

Citizenship Peru

Mailing Address 8335 Dacosta Street

City Downey

State CA

ZIP 90240

Country USA

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NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Yohini

Family Name
or Surname Appa

Inventor's
Signature

Date

Residence: City Torrance

State CA

Country USA

Citizenship USA

Mailing Address 1324 Portola Avenue

City Torrance

State CA

ZIP 90501

Country USA